



ISSUE SLIP STAPLE AREA (for additions! cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	71058	6-8-99
O.I.P.E. CLASSIFIER			12-2-99
FORMALITY REVIEW		71476	6/21/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
÷ Restricted O Objected

Claim	Date						
Final	Original	10	4	1	6	10	4
		00	01	02	03	03	03
1	✓	✓	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓	✓	✓
7	✓	✓	✓	✓	✓	✓	✓
8	✓	✓	✓	✓	✓	✓	✓
9	✓	✓	✓	✓	✓	✓	✓
10	✓	✓	✓	✓	✓	✓	✓
11	✓	✓	✓	✓	✓	✓	✓
12	✓	✓	✓	✓	✓	✓	✓
13	✓	✓	✓	✓	✓	✓	✓
14	✓	✓	✓	✓	✓	✓	✓
15	✓	✓	✓	✓	✓	✓	✓
16	✓	✓	✓	✓	✓	✓	✓
17	✓	✓	✓	✓	✓	✓	✓
18	✓	✓	✓	✓	✓	✓	✓
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40	✓	✓	✓	✓	✓	✓	✓
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43	✓	✓	✓	✓	✓	✓	✓
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46	✓	✓	✓	✓	✓	✓	✓
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48	✓	✓	✓	✓	✓	✓	✓
49	✓	✓	✓	✓	✓	✓	✓
50	✓	✓	✓	✓	✓	✓	✓

Claim	Date						
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If more than 150 claims or 10 actions
staple additional sheet here

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